

SUBSTANCE ABUSE RESOURCE GUIDE

Suicide

Substance abuse is frequently associated with suicide. For instance, high school students who view themselves negatively, who are depressed, or who find little meaning in their lives are more likely to consider suicide and to abuse drugs. While no cause-and-effect relationship between the use of alcohol or other substances has been established in research to date, the use of such substances often is a contributing factor, and the research does indicate several possible explanations. First, the use of alcohol, other substances, or both may reduce inhibitions and impair the judgment of someone contemplating suicide and thus make the act of suicide more likely. Second, the use of substances by family members or the individual may aggravate other risk factors for suicide such as depression or other mental illnesses.

This resource guide presents recent research on the relationship between suicide and substance abuse. The first section includes information on the connection between substance abuse and suicide. The second section provides national databases that are useful for the study of suicide and a list of organizations concerned about suicide.

Nelba Chavez, Ph.D

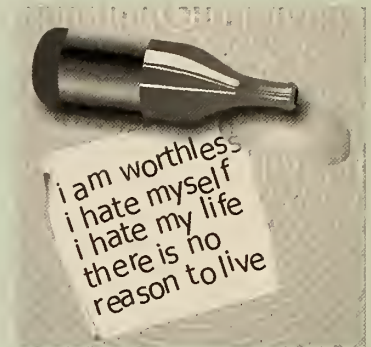
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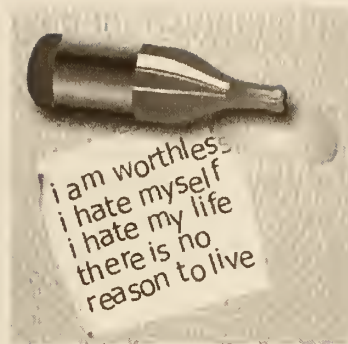


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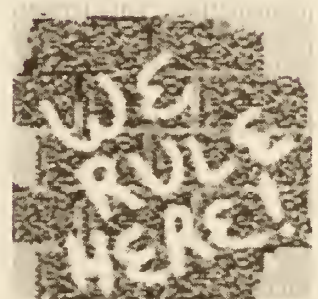
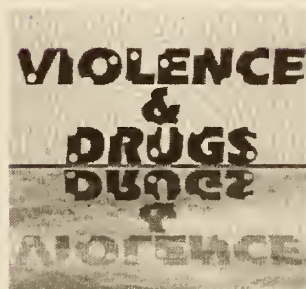
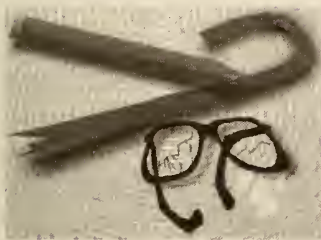
4574
OMH-RC-Knowledge Center
5515 Security Lane, Suite 101
Rockville, MD 20852
1-800-444-6472



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Prevention



SUICIDE



The listing of materials or programs in this resource guide does not constitute or imply endorsement by the Center for Substance Abuse Prevention, the Public Health Service, the Substance Abuse and Mental Health Services Administration, or the Department of Health and Human Services. The materials have been reviewed for accuracy, appropriateness, and conformance with public health principles.

This Substance Abuse Resource Guide was compiled from a variety of publications and data bases and represents the most current information to date. It is not an all-inclusive listing of materials on this topic. This guide will be updated regularly, and your comments or suggestions are welcome. To suggest information or materials that might be included in future editions, please write to SAMHSA's National Clearinghouse for Alcohol and Drug Information (NCADI), P.O. Box 2345, Rockville, MD 20847-2345.

Produced by SAMHSA's National Clearinghouse for Alcohol and Drug Information, Lucinda Myers, editor.

For further information on alcohol, tobacco, and illicit drugs, call 800-729-6686, 301-468-2600, or TDD 800-487-4889. Or visit us on our World Wide Web site at <http://www.health.org>.



Please feel free to be a "copy cat," and make all the copies you want. You have our permission!

Coping With Teen Suicide

Suicide is the second leading cause of death among teenagers. This book is directed to teens contemplating suicide and anyone who is close to them. Employing anonymous case histories, the author explores contributing factors such as societal stress, challenges of adolescent development, and the special problems of gay and lesbian teens. Depression is cited as an important symptom and stage of the process leading to suicide. The book includes chapters on "Mistaken Thinking" (a sense of limited options and illusions about the nature of death), coping skills, and the plight of surviving relatives and friends.

Author: *Murphy, J.*

Year: 1999

Format: Book

Length: 125 pages

Topic: Teenage suicide

Target Audience: Teens (grade 6 and up)

Availability: Bookstores

Cost: \$17.95

The Harvard Medical School Guide to Suicide Assessment and Intervention

This book is designed to help clinicians identify patients at risk for suicide and outlines appropriate steps to reduce the risk. It explains methods for determining the risk level for suicidal or at-risk patients, recommends a suicide assessment protocol that can easily be included into clinical practice, and provides guidelines for intervening when people risk harming themselves. The subject populations include adolescents; the physically ill; and those with major mental illness, alcoholism, and borderline personality disorder.

Year: 1998

Format: Book

Length: 704 pages

Topic: Suicide assessment and intervention

Target Audience: Clinicians

Availability: Bookstores or contact Jossey-Bass Publishers, 350 Sansome Street, San Francisco, CA 94104; 415-433-1740; www.josseybass.com

Cost: \$59.95

The Suicidal Mind

The Suicidal Mind differs from many other books on suicide by asserting that the primary means of preventing suicide is not the study of the brain, but the study of human emotions because psychological pain is the primary cause of suicide. The book provides insight into suicidal impulses and suggestions on how to counteract them.

Author: Shneidman, E.

Year: 1998

Format: Book

Length: 208 pages

Topic: Suicide

Target Audience: Families, physicians, people contemplating suicide

Availability: Bookstores, or contact Oxford University Press, 198 Madison Avenue, New York, NY 10016; 212-726-6000; www.oup.co.uk

Cost: \$13.95

Making Sense of Suicide: An In-Depth Look at Why People Kill Themselves

Making Sense of Suicide is an introduction to the background and prevention of suicidal behaviors. It provides relevant information for all professionals who may encounter people considering suicide.

Author: Lester, D.

Year: 1997

Format: Book

Length: 224 pages

Topic: Suicide

Target Audience: Health professionals, educators, and parents

Availability: Bookstores or contact Charles Press Publishers, P.O. Box 15715 Philadelphia, PA 19103; 215-545-8933; www.charlespresspub.com

Cost: \$22.95

Booklets, Brochures, Fact Sheets, and Reports

Patterns of Alcohol Use Among Adolescents and Associations with Emotional and Behavioral Problems

This report provides data showing the relationship among the emotional state, health, behaviors, and alcohol use. The data cannot be used to provide a causal relationship because they are not longitudinal, but examining correlations of frequency of alcohol use with problems provides some evidence that an increase in the amount consumed is associated with problem behaviors.

Author: Greenblatt, J.

Organization: Office of Applied Studies

Year: 2000

Format: Report

Length: 28 pages

Topic: Adolescent alcohol abuse

Target Audience: Prevention program planners, general audience

Availability: Office of Applied Studies, 5600 Fishers Lane, Room 16C-06, Rockville, MD 20857; 301-443-6239; www.samhsa.gov/oas/oasftp.htm

Cost: Free

Year-End Emergency Department Data from the Drug Abuse Warning Network

This series of reports from the Drug Abuse Warning Network examines trends in the number of drug mentions in emergency department episodes. The study also compares the incidence of specific drug mentions in major metropolitan areas. Included are persons ages 6 and older who were treated in the hospital's emergency department with a presenting problem that was induced by or related to the nonmedical use of a licit drug or any use of an illicit drug that was taken because of dependence, suicide attempt or gesture, or psychic effects. This year-end data summarizes the preliminary data from July to December 1998 and compares the trends with the previous 20 years.

Year: 1999

Format: Report

Length: 122 pages

Topic: Drug abuse trends in the United States

Target Audience: Prevention program planners, community leaders, statisticians

Availability: SAMHSA's National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, 800-729-6686; www.health.org

Cost: Free

Suicide Research Program

This report contains abstracts of suicide research projects funded in fiscal year 1999 by the National Institute of Mental Health (NIMH). NIMH extramural support for research projects focused on suicide or containing large suicide components totaled approximately \$15 million.

Year: 1999

Format: Report

Length: 41 pages

Topic: Suicide

Target Audience: Researchers, health professionals

Availability: National Institute for Mental Health; 6001 Executive Boulevard, Room 8184, Bethesda, MD 20892; 301-443-4513; www.nimh.nih.gov
Also available online at www.nimh.nih.gov/research/suicide.htm

Cost: Free

Making the Link: Alcohol and Other Drugs and Suicide

This fact sheet explains the relationship of alcohol and drug use and persons contemplating suicide.

Organization: Center for Substance Abuse Prevention

Year: 1995

Format: Fact sheet

Length: 1 page

Topic: Connection between substance abuse and suicide

Target Audience: General public, high-risk youth, young adults, community service groups

Availability: SAMHSA's National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686; www.health.org

Cost: Free

Magazines and Newsletters

Archives of Suicide Research

This magazine, *Archives of Suicide Research*, is the official journal of the International Academy of Suicide Research. Its articles focus on all aspects of suicide.

Year: Published quarterly

Format: Magazine

Length: Varies

Topic: Suicide

Target Audience: General audience

Availability: Kluwer Academic Publishers, P.O. Box 358, Accord Station, Hingham, MA 02018-0358; www.priory.com/kluwer.htm

Cost: \$135 for annual subscription

Suicide and Life-Threatening Behavior

The official publication of the American Association of Suicidology (AAS), *Suicide and Life-Threatening Behavior* is dedicated to the understanding and prevention of suicide.

Organization: American Association of Suicidology

Year: Published quarterly

Format: Magazine

Length: Varies

Topic: Suicide

Target Audience: Members of the American Association of Suicidology

Availability: American Association of Suicidology, 4201 Connecticut Ave., NW., Suite 408, Washington, DC 20008; 202-237-2280; www.suicidology.org

Cost: Free with membership in AAS

Surviving Suicide

Published by the American Association of Suicidology (AAS), this newsletter is written for and by survivors of suicide.

Organization: American Association of Suicidology

Year: Published quarterly

Format: Newsletter

Length: Varies

Topic: Suicide

Target Audience: Suicide survivors, members of AAS

Availability: American Association of Suicidology, 4201 Connecticut Ave., NW., Suite 408, Washington, DC 20008; 202-237-2280; www.suicidology.org

Cost: Free with membership in AAS, \$20 per year for non-members

American Indian Life Skills Curriculum

Unfortunately, suicide is a significant problem for many adolescents in Native American Indian populations. This curriculum for middle and high school students is designed to reduce suicidal thinking and behavior. Created in collaboration with students and community members from the Zuni Pueblo and the Cherokee Nation of Oklahoma, it addresses key issues in Native American Indian adolescents' lives and teaches such life skills as communication, problem solving, depression, stress management, anger regulation, and goal setting. Taking a skill-based approach, the course first increases awareness and knowledge of suicide, then teaches specific methods to help a peer turn away from suicidal thinking and seek help from an appropriate help giver.

Author: Lafromboise, T.

Year: 1996

Format: Workbook

Length: 408 pages

Topic: Suicide prevention

Target Audience: Teachers and educators of Native American high school students

Availability: Bookstores, or contact University of Wisconsin Press, c/o Chicago Distribution Center, 11030 South Langley Avenue, Chicago, IL 60628; 800-621-8476; www.wisc.edu/wisconsinpress/

Cost: \$22.95

Videos, Posters, and Other Items

Reach Out With Hope

Reaching Out With Hope presents risk factors and guidelines for assisting adults in suicidal crisis, and includes a study guide.

Year: 1997

Format: Video

Length: 19 minutes and
33-page study guide

Topic: Suicide

Target Audience: Prevention
program planners, friends and family
of suicidal adults, general audience

Availability: Suicide Information
and Education Center,
#201, 1615-10th Avenue,
SW., Calgary, Alberta, Canada
T3C0J7; 403-245-3900;
www.siec.ca

Cost: \$50

The Suicidal Patient: Assessment and Care

Over two-thirds of the Americans that commit suicide each year have seen a physician within a month of their death. For this reason, it is very important for primary care physicians to recognize signs of depression and potential suicide in their patients. This film provides guidelines for assessing the suicide risk of their patients including depression warning signs, particular populations at risk, and appropriate intervention strategies.

Year: 1996

Format: Video

Length: 15 minutes

Topic: Suicide assessment and
prevention

Target Audience: Primary care
physicians

Availability: American Foundation
for Suicide Prevention,
120 Wall Street, 22nd Floor,
New York, NY 10005; 888-
333-AFSP; www.asfp.org

Cost: \$5.95

Cocaine Use Associated with Increased Suicidal Behavior in Depressed Alcoholics

Balak, A.; Cornelius, J.; Thase, M.; and Salloum, I.

Addictive Behaviors, 23(1): 119–121, 1998

This study strived to determine whether depressed alcoholics who used cocaine would display a higher prevalence of suicidal behavior and suicidal ideation than depressed alcoholics who did not use cocaine. Forty-one depressed alcoholics participated in this prospective study of consecutively admitted patients. Seventeen

patients (41.5 percent) had made a suicide attempt during their current depressive episode, and all but one of these attempts occurred during the week before their hospitalization. Ten patients used cocaine in the week before hospitalization, and 7 of these 10 had made a suicide attempt during that week. In contrast, only 32 percent of the depressed alcoholics who did not use cocaine made a suicide attempt during that week. Suicidal ideation was also more prevalent in alcoholics who used cocaine. The authors conclude that cocaine use is associated with an increased prevalence of suicidal behavior and suicidal ideation in depressed alcoholics.

Psychiatric Comorbidity, Suicidal Behavior, and Suicidal Ideation in Alcoholics Seeking Treatment

Driessen, M.; John, U.; Veltrup, C.; and Weber, J.

Addiction, 93(6): 889–894, 1998

This article estimates the impact of coexisting disorders for suicidal ideas in 250 alcohol-dependent subjects seeking treatment. Suicidal behaviors were assessed after detoxification and 12 months after each subject's discharge. The authors found that a history of suicide attempts

was reported by 29.2 percent and suicidal ideas by 14.1 percent, and that suicide attempts were reported by 5.4 percent at the follow-up. One female patient committed suicide within 6 months of discharge from the hospital. The following comorbidity patterns were associated with the greatest risk for suicidal ideas: anxiety and depressive disorders, axes I and II disorders, and a history of suicide attempt. The authors conclude that the importance of psychiatric comorbidity for the suicidal risk in alcohol-dependent patients is important, while alcoholism itself appears to be only a moderate risk factor.

Substance Abuse and Suicide: Promoting Resilience Against Self-Destructive Behavior in Youth

Forman, S.; and Kalafat, J.

School Psychology Review, 27(3): 398–406, 1998

Substance abuse and suicide have been recognized as major self-destructive behaviors of

youth, have strong comorbidity, and have substantial overlap with regard to risk and protective factors. This article summarizes information on these behaviors, risk and protective factors, and the effectiveness of existing prevention programs. A coordinated, resilience-building prevention strategy is proposed which addresses generic and domain-specific knowledge and skills.

Substance Use: Comparison of Adolescent and Young Adult Suicide and Accidental Death

Davis, D.; Riggin, O.; and Sumner, D.

Journal of Addictions Nursing, 10(1): 34–39, 1998

In the United States in 1995, 72 percent of all deaths between school-age youth and young adults resulted from four causes: motor vehicle crashes, other unintentional injuries, homicides, and suicides. This study examines adolescent and young adult suicide and accidental death

rates in relation to substance use prior to death. The results of the study show an alarming increase in the role of substance use/abuse in adolescent and young adult accidental and suicidal deaths. Substance abuse and mental disorders are the two most important risk factors in attempted and completed adolescent and young adult suicide. Also noted as contributing to the increase in the adolescent and young adult suicide rate is the easy accessibility to weapons, either from the home or off the street due to the increasing gang and drug trade.

Suicide Methods and Presence of Intoxicating Abusable Substances: Some Clinical and Public Health Implications

Dhossche, D.; Dirk, M.; Ghani, S.; Isacson, G.; and Rich, C.

Annals of Clinical Psychiatry, 10(4): 169–175, 1998

This article examines the relationship between presence of intoxicating abusable substances (IAS) at postmortem toxicology and any specific suicide method. The study included 179 suicides of 14- to 88-year-olds from San Diego, CA, in 1981–1982, and 225 suicides of 14- to 92-year-olds from Mobile, AL, in 1990–1995, for which comprehensive toxicological examination had been conducted. Suicide methods were grouped into more immediately

fatal (MIF) and less immediately fatal (LIF) categories. The most common method in each category (guns and overdoses, respectively) was examined separately as well. The same proportions of men and women were positive for any IAS in both locations. Significantly more of the Mobile suicides than the San Diego suicides were by MIF methods for both genders, and were almost totally attributable to the use of guns. The use of guns for suicide in Mobile was also significantly higher. Nonetheless, the suicide rates for men and women in Mobile were no higher than for the overall United States. The authors concluded that potentially suicidal people should be advised to avoid intoxicating substances of any kind. The authors also suggest that physicians should avoid prescribing such substances to depressed or suicidal patients.

Overdose, Suicide Attempts, and Death Among a Cohort of Naltrexone-Treated Opioid Addicts

Frosch, D.; McCann, M.; Miotto, K.; and Rawson, R.

Drug and Alcohol Dependence, 45(1-2): 131-134, 1997

This article reports on a cohort of naltrexone-treated opioid addicts in which there appeared to be unusually high rates of overdose, suicidal behavior, and death. The participants were assigned to either an intensive psychosocial pro-

tol or standard community treatment for opioid dependence and given 50 mg. naltrexone to be taken once daily. A battery of measures were administered as baseline data, with follow-up interviews at 6 and 12 months after treatment assignment. The results indicated that 13 participants overdosed within the 12-month study period. There were four fatalities, one of which was a suicide. Among the nine non-fatal overdoses were four suicide attempts. The demographic and drug use characteristics of the participants are also described.

Risk of Suicide Attempts After Benzodiazepine and/or Antidepressant Use

Neutel, C.; and Patten, S.

Annals of Epidemiology, 7(8): 568-574, 1997

This study evaluates suicide attempts in subjects recently exposed to benzodiazepines or antidepressants, as compared to unexposed controls. A population of 225,796 persons with prescriptions for benzodiazepines indicated that non-

antidepressant users had statistically significant associations among suicide attempts and benzodiazepine use, antipsychotic use, and a history of past treatment for drug/alcohol abuse. The association between benzodiazepine use and attempted suicide is especially high for non-antidepressant users, the young, and males. Physicians should be aware of the high potential for suicide attempts when prescribing benzodiazepines for patients in these high-risk groups.

Role of Drugs and Alcohol in Urban Minority Adolescent Suicide Attempts

Jones, G.

Death Studies, 21(2): 189-202, 1997

This study examines psychopathology and substance use in 15 African-American adolescents who attempted suicide and a control group consisting of 15 African-American adolescents who did not attempt suicide. Both groups of adolescents and their parents completed ques-

tionnaires that addressed depression, behavior problems, family functioning, and drug and alcohol use. The suicidal youth were found to have a significant level of depression in addition to a variety of internalizing and externalizing behavior disorders. The suicidal youth were at a high risk for alcohol and drug abuse. The results indicated that suicidal African-American adolescents used significant amounts of drugs and alcohol, which may be associated with suicidal attempts.

Suicide and Alcoholism: Distinguishing Alcoholic Patients With and Without Comorbid Drug Abuse

Caine, E.; Conwell, Y.; Cox, C.; Duberstein, P.;

Forbes, N; and Porsteinsson, A.

American Journal on Addictions, 6(4): 304–310, 1997

This study uses psychological autopsy data to test the hypothesis that alcoholic patients with comorbid drug use disorders who committed suicide (AD) are distinguishable from alcoholic suicide victims without a comorbid drug use disorder (AL). The dependent variables included demographics, suicidal behavior, psychiatric

symptoms, and medical illness burden. The AL group were older, white, and tended to live alone. Analyses that controlled for age and sex indicated that the AL group were more likely to have a comorbid major depression and less likely to tell someone they were contemplating suicide than was the AD group. Scores on a measure of illness burden increased with age among the AL group but not the AD group, though the latter were more likely to be under a physician's care with increasing age. These differences should be considered when designing prevention measures.

Violence, Suicidality, and Alcohol/Drug Use Involvement in Adolescent Females with a Psychoactive Substance Use Disorder and Controls

Barrett, C.; Giancola, P.; Lu, S.; Mezzich, A.;

Parks, S.; and Tarter, R.

Alcoholism: Clinical and Experimental Research, 21(7): 1300–1307, 1997

This study had three objectives: (1) to determine the relationship between behavioral dysregulation, negative affectivity, and familial impairment with violence and suicidality in 161 adolescent females (ages 14 to 18) with a psychoactive substance use disorder and 80 controls; (2) to determine whether these relations are mediated by internalizing and externalizing symptomatology; and (3) to determine whether severity of alcohol/drug use involvement mod-

erates the relations between the mediating variables with violence and suicidality. Behavioral dysregulation, negative affectivity, and familial impairment were related to violence, whereas only familial impairment was related to suicidality. Internalizing symptomatology mediated the relation between familial impairment and suicidality, and was related to violence, whereas externalizing symptomatology mediated the relations between behavioral dysregulation, negative affectivity, and familial impairment with violence. Severity of substance use involvement did not moderate the relations between internalizing or externalizing symptomatology with suicidality or violence. Internalizing symptomatology and suicidality correlation was stronger in females with a greater degree of substance use involvement.

Alcohol and Suicide—Beyond the Link at the Individual Level

Rossow, I.

Addiction, 91(10): 1413–1416, 1996

This article discusses some theories of how the association between alcohol and completed suicide is formed. The author discusses some of the consistencies and inconsistencies in the empirical findings as well as some of the future challenges for research in this area.

Alcohol Availability, Alcoholism, and Suicide and Homicide

Lester, D.

American Journal of Drug and Alcohol Abuse, 21(1): 147–150, 1995

Using R.G. Smart's 1977 measures of alcohol availability, use, and abuse, this study explores the association of alcohol abuse and availability

with rates of suicide and homicide in the United States. The authors find that suicide rates were associated with per capita consumption, but not with alcohol availability or abuse. While alcohol-related variables appear to have no effect on statewide homicide rates, alcohol consumption was associated with statewide suicide rates, though not as strongly as divorce rates.

Organizations and Internet Sites

American Association of Suicidology
4201 Connecticut Avenue NW., Suite 408
Washington, DC 20008
202-237-2280
www.suicidology.org

American Foundation for Suicide Prevention
120 Wall Street, 22nd Floor
New York, NY 10005
888-333-AFSP
www.asfp.org

American Psychiatric Association
DPA Dept. SG
1400 K Street, NW.
Washington, DC 20005
202-682-6000
www.psych.org

American Psychological Association (APA)
750 First Street, NE.
Washington, DC 20002
202-336-5500
www.apa.org

Bureau of Justice Statistics
810 Seventh Street, NW.
Washington, DC 20531
www.ojp.usdoj.gov/bjs

Center for Substance Abuse Prevention
5600 Fishers Lane, Rockwall II
Rockville, MD 20857
301-443-0365
www.samhsa.gov/csap

Decision Support System for Prevention of Substance Abuse
www.preventiondss.org

National Clearinghouse for Alcohol and Drug Information
P.O. Box 2345
Rockville, MD 20847
800-729-6686
www.health.org

National Council on Alcoholism and Drug Dependence
12 West 21 Street
New York, NY 10010
800-NCACALL
www.ncadd.org/

National Depressive and Manic-Depressive Association
730 North Franklin Street, Suite 501
Chicago, IL 60610-3526
800-826-3632
www.ndmda.org/

National Institutes of Health (NIH)
Bethesda, MD 20892
www.nih.gov

National Institute of Mental Health (NIMH)
6001 Executive Boulevard, Room 8184
Bethesda, MD 20892
301-443-4513
www.nimh.nih.gov

National Suicide Hotline
1-800-SUICIDE

Partnership for a Drug-Free America
405 Lexington Avenue, 16th Floor
New York, NY 10174
212-922-1560
www.drugfreeamerica.org

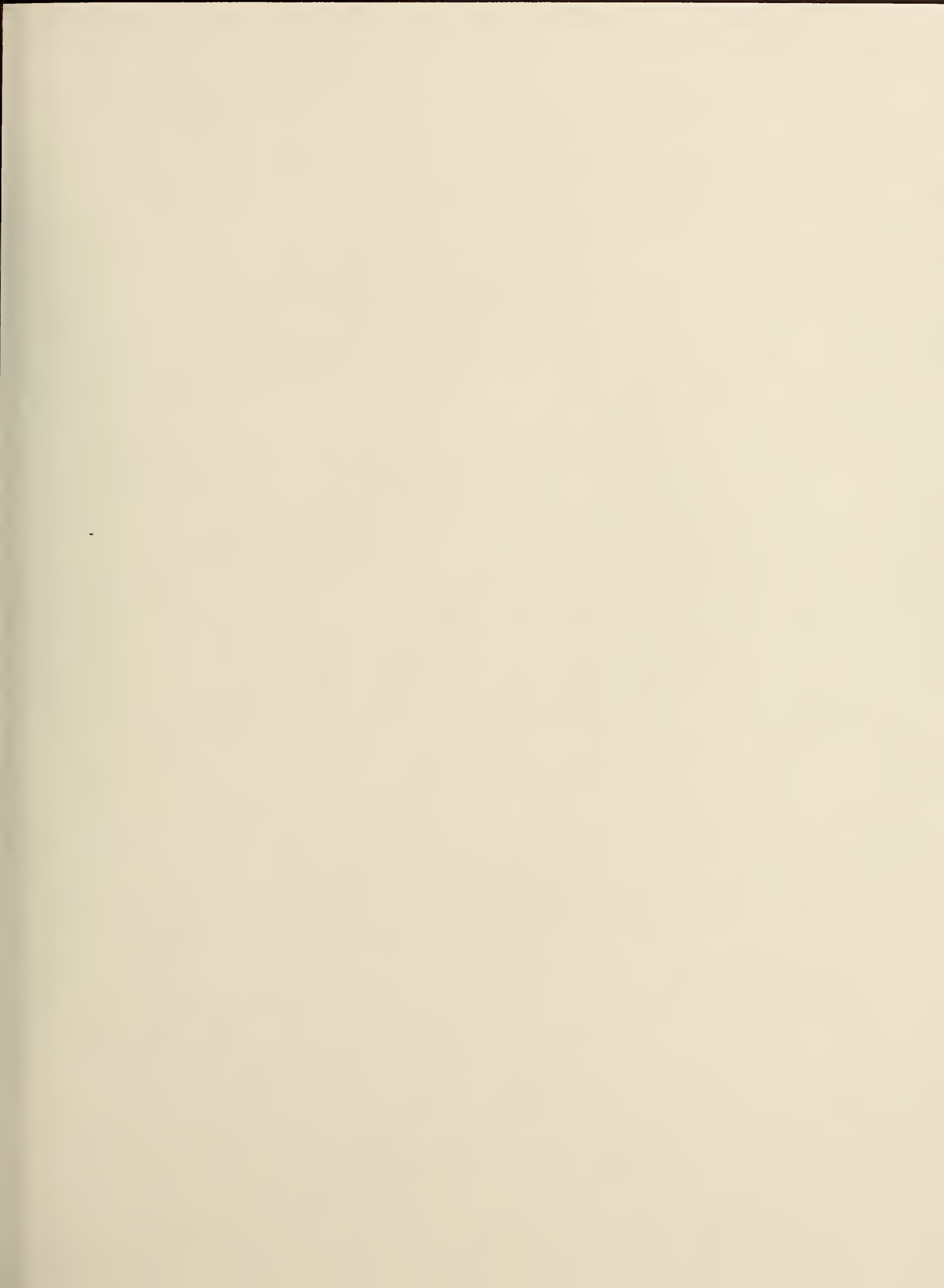
Partnerships Against Violence Network (Pavnet)
www.pavnet.org

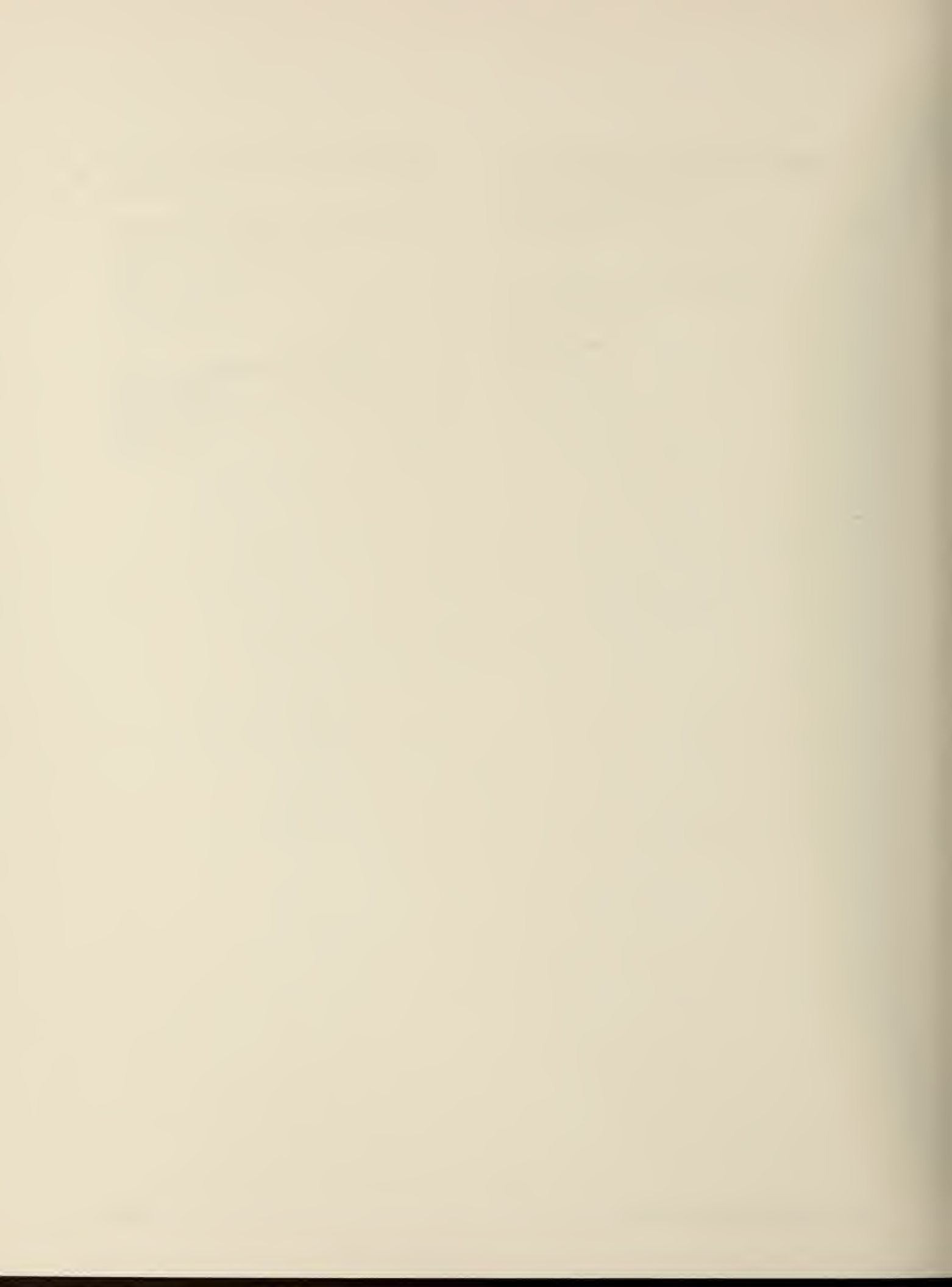
Substance Abuse and Mental Health Services
Administration (SAMHSA)
Room 12-105 Parklawn Building
5600 Fishers Lane
Rockville, MD 20857
www.samhsa.gov

Suicide Awareness/Voices of Education
P.O. Box 24507
Minneapolis, MN 55424
612-946-7998
www.save.org

Suicide Information and Education Centre (SIEC)
#201 1615-10th Avenue SW.
Calgary, Alberta T3C0J7
403-245-3900
www.siec.ca/

Suicide Prevention Advocacy Network
5034 Odin's Way
Marietta, GA 30068
888-649-1366
www.spanusa.org







Other resource guides in this series include:

Children Witnessing Violence and Substance Abuse

SMA 00-3449



Youth Firearm Violence

SMA 00-3442



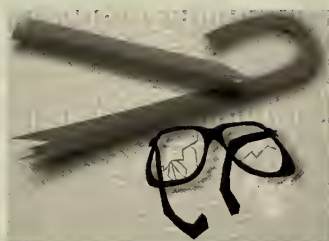
Hate Crimes

SMA 00-3445



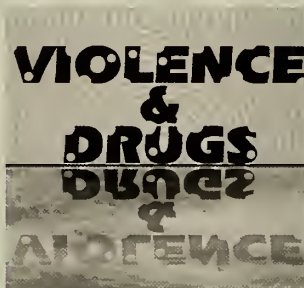
Violence Against the Elderly

SMA 00-3443



Violence: An Overview of Its Relationship to Substance Abuse

SMA 00-3326



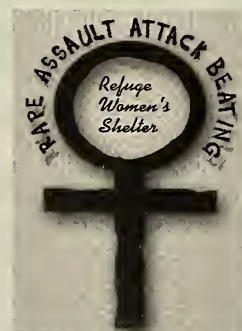
Gangs

SMA 00-3444



Violence Against Women

SMA 00-3450



Violence in the Media

SMA 00-3447



Violence in Schools

SMA 00-3446

